Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 17-15654-leb Doc 14 Entered 11/17/17 11:23:43 Page 5 of 49

		J 0.	70	
Fill	in this information to identify your case:			
Del	otor 1 Panisse Renell Debesai			
Del	First Name Middle Name Last Name			
	ouse if, filing) First Name Middle Name Last Name			
Uni	ted States Bankruptcy Court for the: DISTRICT OF NEVADA			
Cas	se number 17-15654			
l .	nown)	_	Check if thi	
		ć	amended fi	iling
	ficial Form 106Sum			
	mmary of Your Assets and Liabilities and Certain Statistical Information		12/1	-
info	as complete and accurate as possible. If two married people are filing together, both are equally responsible fo rmation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend			
you	r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.			
Par	t 1: Summarize Your Assets			
			our assets	
		V	alue of wha	at you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$;	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	\$	12,320.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	ò	12,320.00
Da				,
Par	t 2: Summarize Your Liabilities	_		
			our liabilit mount you	
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	3	9,850.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)			
	3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	·	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$;	31,210.08
	Your total liabilities	\$		41,060.08
	Tour total nationals			41,000.00
Par	t 3: Summarize Your Income and Expenses			
4.	Schedule I: Your Income (Official Form 106I)			
٦.	Copy your combined monthly income from line 12 of Schedule I	\$;	3,433.08
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	S	4,639.00
Par	t 4: Answer These Questions for Administrative and Statistical Records			
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?			
υ.	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur oth	er schedul	es.
	■ Yes			
7.	What kind of debt do you have?			
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a per	sonal, fami	ly, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

Case 17-15654-leb Doc 14 Entered 11/17/17 11:23:43 Page 6 of 49

Debtor 1 Panisse Renell Debesai

Case number (if known) 17-15654

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____3,991.40

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total claim	
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Case 17-15654-leb Doc 14 Entered 11/17/17 11:23:43 Page 7 of 49

	0400 17 1000 7 107	3		
Fill in this inforr	nation to identify your case a	nd this filing:		
Debtor 1	Panisse Renell Debesa	I		
Dobtor 2	First Name	Middle Name Last Name		
(Spouse, if filing)	First Name	Middle Name Last Name		
United States Ba	nkruptcy Court for the: DISTF	RICT OF NEVADA		
Coop number	47.45554			— • • • • • • • •
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: DISTRICT OF NEVADA Case number 17-15654 Check if this is an amended filing Official Form 106A/B Schedule A/B: Property In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying or where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying or where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying or where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying or where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying or where you think it fits best. Be as complete and accurate your name and case number (if known). Part 12 Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? Part 22 Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes 3. Make: Honda Who has an interest in the property? Check one Do not deduct secured claims on Schedule D: the amount of any secured claims on Schedule D:				
Debtor 1 Panisse Renell Debesai First Name Middle Name Last Name United States Bankruptcy Court for the: DISTRICT OF NEVADA Case number 17-15654 Case number 17-15654 Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it it is best. Be as complete and accurate as possible. If two married people are filing tiggether, both are equally responsible for supplying correct intervals. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes Po not deduct secured claims or exemptions. Put				
Official Fo	rm 106Δ/R			
				4044
			an antogony list the asset in	
think it fits best. B information. If more	e as complete and accurate as po e space is needed, attach a separ	ossible. If two married people are filing together, both are	e equally responsible for su	pplying correct
Part 1: Describe	Each Residence, Building, Land,	or Other Real Estate You Own or Have an Interest In		
1. Do you own or h	nave any legal or equitable interes	st in any residence, building, land, or similar property?		
No. Go to Par	+ 2			
_				
	o the property.			
Part 2: Describe	Your Vehicles			
□ No	, , , , , , , , , , , , , , , , , , ,	, ,		
3.1 Make I	Honda	Who has an interest in the property? Check one		
_	Pilot	■ Debtor 1 only		
Year:	2008	Debtor 2 only	Current value of the	Current value of the
Approximate		Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other inform	nation:	☐ At least one of the debtors and another		
		☐ Check if this is community property (see instructions)	\$6,015.00	\$6,015.00
Examples: Boar No Yes Add the dolla .pages you ha	ar value of the portion you ow ave attached for Part 2. Write	d other recreational vehicles, other vehicles, and tercraft, fishing vessels, snowmobiles, motorcycle act of the following items?	r entries for	\$6,015.00 Current value of the portion you own? Do not deduct secured
				claims or exemptions.

6. **Household goods and furnishings** *Examples:* Major appliances, furniture, linens, china, kitchenware

□ No

Schedule A/B: Property Official Form 106A/B

Case 17-15654-leb Doc 14 Entered 11/17/17 11:23:43 Page 8 of 49

Debtor	1 Panisse	Renell Debesai	Case number (if known)	17-15654
■ Ye	es. Describe			
		Appliances & Furniture		\$1,300.00
	<i>mples:</i> Televisio includin	g cell phones, cameras, media players, games	equipment; computers, printers, scanners; music co	ollections; electronic devices
		TVs, Computer		\$1,500.00
Exam	other co	s and figurines; paintings, prints, or other artwork illections, memorabilia, collectibles	k; books, pictures, or other art objects; stamp, coin,	or baseball card collections;
		Books, Pictures		\$200.00
Exan	<i>mples:</i> Sports, p musical	instruments	nent; bicycles, pool tables, golf clubs, skis; canoes a	and kayaks; carpentry tools;
		Exercise Equipment		\$300.00
■ No	amples: Pistols, o es. Describe	, rifles, shotguns, ammunition, and related equip	ment	
		ay clothes, furs, leather coats, designer wear, sl	noes, accessories	
		Clothing, Shoes, Coats		\$1,500.00
	<i>amples:</i> Everyd		wedding rings, heirloom jewelry, watches, gems, g	gold, silver
		Jewelry		\$1,500.00
Exa ■ No	-	cats, birds, horses		
■ No	0	al and household items you did not already li	ist, including any health aids you did not list	

Case 17-15654-leb Doc 14 Entered 11/17/17 11:23:43 Page 9 of 49

De	ebtor 1	Panisse Renel	l Debesai			Case number (if known)	17-15654
15					3, including any entri	es for pages you have attached	\$6,300.00
Pa	rt 4: Des	scribe Your Financia	ıl Assats				
				le interest in an	y of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No	les: Money you ha	•	•		and on hand when you file your petiti	on
						Cash	\$5.00
17.	Examp □ No	•	•		ts; certificates of depos th the same institution, Institution name:	it; shares in credit unions, brokerage list each.	nouses, and other similar
				Paid Debit	Duch		¢0.00
			17.1. Car	1	Rush		\$0.00
	■ No □ Yes	blicly traded stoc	Institu	ion or issuer nar		ket accounts ed businesses, including an interes	t in an LLC, partnership, and
		Give specific inform	mation about Name of e			% of ownership:	
	Negotia Non-ne ■ No	<i>able instrument</i> s in	clude persona ets are those y	al checks, cashie rou cannot transf nem	ble and non-negotiab ers' checks, promissory fer to someone by signi	notes, and money orders.	
		nent or pension acides: Interests in IRA		ogh, 401(k), 403	(b), thrift savings accou	ints, or other pension or profit-sharing	plans
		List each account s	separately. Type of acco	unt:	Institution name:		
	Your sl Examp		deposits you l			rvice or use from a company s, water), telecommunications compar	nies, or others
	■ No □ Yes				Institution name or	individual:	
			a periodic pay	ment of money t	o you, either for life or f	or a number of years)	
	■ No	•		·		• •	
	☐ Yes	Issu	er name and	description.			
		s in an education C. §§ 530(b)(1), 529			ified ABLE program, o	or under a qualified state tuition pro	ogram.

Case 17-15654-leb Doc 14 Entered 11/17/17 11:23:43 Page 10 of 49

De	ebtor 1	Panisse Renell Debesai		C	ase number (if known)	17-15654
	☐ Yes	Institution name and	d description. Separately file the rec	ords of any interes	sts.11 U.S.C. § 521(c):	
25.	_	equitable or future interests in	property (other than anything list	ed in line 1), and	rights or powers exe	rcisable for your benefit
	■ No □ Yes.	Give specific information about th	em			
26.	Examp ■ No		secrets, and other intellectual prites, proceeds from royalties and lic		s	
27.	License Examp	es, franchises, and other genera	Il intangibles enses, cooperative association hold	lings, liquor license	es, professional license	es
M	oney or _l	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you				
	□ No	·				
	Yes.	Give specific information about the	em, including whether you already fi	led the returns and	I the tax years	
			2017 Tax Refund		Federal	Unknown
29.	Examp ■ No	support bles: Past due or lump sum alimon Give specific information	/, spousal support, child support, m	aintenance, divorc	e settlement, property	settlement
30.		nmounts someone owes you bles: Unpaid wages, disability insur benefits; unpaid loans you ma	ance payments, disability benefits, ade to someone else	sick pay, vacation	pay, workers' comper	sation, Social Security
	☐ Yes.	Give specific information				
31.		ts in insurance policies bles: Health, disability, or life insura	ince; health savings account (HSA)	credit, homeowne	er's, or renter's insuran	ce
		Name the insurance company of e Company na		Beneficiary	r.	Surrender or refund value:
32.	If you a	rerest in property that is due you are the beneficiary of a living trust, ne has died.	from someone who has died expect proceeds from a life insuran	ce policy, or are c	urrently entitled to rece	vive property because
	■ No □ Yes.	Give specific information				
33.	Examp		r not you have filed a lawsuit or r les, insurance claims, or rights to su		or payment	
	■ No □ Yes.	Describe each claim				
34.	_	contingent and unliquidated clai	ms of every nature, including cou	interclaims of the	debtor and rights to	set off claims
	■ No □ Yes.	Describe each claim				

Deb	otor 1	Panisse Renell Debesai		Case number (if known)	17-15654
35. <i>I</i>	Any fin	ancial assets you did not already list			
	No				
L	☑ Yes.	Give specific information			
36.		ne dollar value of all of your entries from Part 4, including rt 4. Write that number here			\$5.00
Part	5: Des	scribe Any Business-Related Property You Own or Have an Intere	st In. List any real esta	ate in Part 1.	
37. D	o you o	wn or have any legal or equitable interest in any business-relate	d property?		
	No. Go	to Part 6.			
	Yes. G	o to line 38.			
Part		scribe Any Farm- and Commercial Fishing-Related Property You out own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. I	Do vou	own or have any legal or equitable interest in any farm-	or commercial fishin	ng-related property?	
	•	Go to Part 7.		.g	
	_	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
		have other property of any kind you did not already list? les: Season tickets, country club membership			
	_	Give specific information			
54.	Add tl	ne dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$0.00
56.	Part 2	: Total vehicles, line 5	\$6,015.00		
57.	Part 3	: Total personal and household items, line 15	\$6,300.00		
58.	Part 4	: Total financial assets, line 36	\$5.00		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.		: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$12,320.00	Copy personal property to	stal \$12,320.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$12.320.00

Fill in this info				
Debtor 1	Panisse Renell D	ebesai		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Sankruptcy Court for the:	DISTRICT OF NEVADA		
Case number	17-15654			
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount	of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check c	nly one box for each exemption.	
2008 Honda Pilot 120,000 miles Line from <i>Schedule A/B</i> : 3.1	\$6,015.00		\$0.00	Nev. Rev. Stat. § 21.090(1)(f
Ente from Goriodale 702.			00% of fair market value, up to applicable statutory limit	
Appliances & Furniture Line from Schedule A/B: 6.1	\$1,300.00		\$1,300.00	Nev. Rev. Stat. § 21.090(1)(I
Line from Schedule AVD. 0.1			00% of fair market value, up to applicable statutory limit	
TVs, Computer Line from Schedule A/B: 7.1	\$1,500.00		\$1,500.00	Nev. Rev. Stat. § 21.090(1)(
Ellie II olii ochedale 242. F. I			00% of fair market value, up to ay applicable statutory limit	
Books, Pictures Line from Schedule A/B: 8.1	\$200.00		\$200.00	Nev. Rev. Stat. § 21.090(1)(
Line from Schedule AVD. G.1			00% of fair market value, up to by applicable statutory limit	
Exercise Equipment Line from Schedule A/B: 9.1	\$300.00		\$300.00	Nev. Rev. Stat. § 21.090(1)(2
Line nom <i>Schedule PVD</i> . 3.1			00% of fair market value, up to applicable statutory limit	

Case 17-15654-leb Doc 14 Entered 11/17/17 11:23:43 Page 13 of 49

De	btor 1	Par	nisse Renell Debesai			Case number (if known)	17-15654
			ription of the property and line on A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Specific laws that allow exemption		
	Copy the value from Schedule A/B			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
			, Shoes, Coats Schedule A/B: 11.1	\$1,500.00		\$1,500.00	Nev. Rev. Stat. § 21.090(1)(b)
	Line nom denedate FVD.		Concaule 702.			100% of fair market value, up to any applicable statutory limit	
		velry	Schodulo A/P: 12 1	\$1,500.00		\$1,500.00	Nev. Rev. Stat. § 21.090(1)(a)
	Line from Schedule A/B: 12.1		Scriedule A/D. 12.1			100% of fair market value, up to any applicable statutory limit	
		Cash		\$5.00		\$5.00	Nev. Rev. Stat. § 21.090(1)(z)
	Line from Schedule A/B: 16.1		Scriedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit	
	Federal: 2017 Tax Refund		2017 Tax Refund Schedule A/B: 28.1	Unknown		Unknown	Nev. Rev. Stat. § 21.090(1)(aa)
	LIIIC	HOIII	Scriedule PAB. 20.1			100% of fair market value, up to any applicable statutory limit	
			2017 Tax Refund Schedule A/B: 28.1	Unknown		\$8,500.00	Nev. Rev. Stat. § 21.090(1)(aa)
	LIIIC	HOIII	Scriedule PAB. 20.1			100% of fair market value, up to any applicable statutory limit	
3.			elaiming a homestead exemption adjustment on 4/01/19 and every			led on or after the date of adjustmen	ıt.)
		No					
		☐ Yes. Did you acquire the property covered by the exemption within 1,215				,215 days before you filed this case?	?
			No				
			Yes				

Case 17-15654-leh Doc 14 Entered 11/17/17 11:23:43 Page 14 of 40

	Case 11-130	54-leb Doc 14 Entered 11/17/	17 11.23.43	raye 14 01 43	
Fill in this informa	tion to identify you	ur case:			
Debtor 1	Panisse Renell	Dehesai			
Debtor 1	First Name	Middle Name Last Name			
Debtor 2					
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Bankı	ruptcy Court for the	: DISTRICT OF NEVADA			
Case number 17-	-15654				
(if known)				☐ Check	if this is an
				ameno	ded filing
Official Form	106D				
		s Who Have Claims Secured	by Proporty		12/15
Scriedule D	. Creditors	Willo have Claims Secured	by Propert	у	12/15
		If two married people are filing together, both are equ out, number the entries, and attach it to this form. On			
1. Do any creditors ha	ve claims secured b	y your property?			
□ No. Check th	nis box and submit t	his form to the court with your other schedules. Yo	u have nothing else to	report on this form.	
Yes. Fill in al	Il of the information	below.			
Part 1: List All S	Secured Claims				
		more than one secured claim, list the creditor separately	Column A	Column B	Column C
for each claim. If more	e than one creditor has	s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Honor Finar	nce	Describe the property that secures the claim:	\$9,850.00	\$6,015.00	\$3,835.00
Creditor's Name		2008 Honda Pilot 120,000 miles			
909 Davis S	t Sto 260	As of the date you file, the claim is: Check all that			
Evanston, II		apply. Contingent			
Number, Street, Ci	ty, State & Zip Code	☐ Unliquidated			
		Disputed			
Who owes the debt	? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		An agreement you made (such as mortgage or secu	ıred		
Debtor 2 only		car loan)			
Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the		☐ Judgment lien from a lawsuit			
Check if this clain community debt		Other (including a right to offset)			
	Opened 02/17 Last				
Date debt was incurr	Active ed 9/20/17	Last 4 digits of account number 5001			
	•	Column A on this page. Write that number here:	\$9,85		
ii this is the last pa	ge or your form, add	the dollar value totals from all pages.	\$9.85	0.00	

Write that number here:

\$9,850.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 17-15654-leb Doc 14 Entered 11/17/17 11:23:43 Page 15 of 49

	Case 17-13032	+-160 DOC 14	Littered 11/1/	111 11.23.43	rage 13 or	43
Fill in th	nis information to identify your o	case:				
Debtor 1	Panisse Renell De	ebesai				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if,	<u> </u>	Middle Name	Last Name			
United S	States Bankruptcy Court for the:	DISTRICT OF NEVA	DA			
Case nu	ımber 17-15654					
(if known)	17-13034				_	heck if this is an
					a	mended filing
Sched	al Form 106E/F dule E/F: Creditors W					12/15
any execu Schedule Schedule left. Attac	nplete and accurate as possible. Us tory contracts or unexpired leases G: Executory Contracts and Unexpi D: Creditors Who Have Claims Sect the Continuation Page to this paga I case number (if known).	that could result in a cla red Leases (Official Forn ured by Property. If more	im. Also list executory on 106G). Do not include space is needed, copy t	contracts on Schedule A/E any creditors with partial the Part you need, fill it ou	3: Property (Offici ly secured claims ut, number the en	al Form 106A/B) and on that are listed in tries in the boxes on the
Part 1:	List All of Your PRIORITY Un	secured Claims				
1. Do a	ny creditors have priority unsecured	d claims against you?				
■ N	lo. Go to Part 2.					
ΠY	es.					
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims				
3. Do a	ny creditors have nonpriority unsec	ured claims against you	?			
ΠN	lo. You have nothing to report in this pa	art. Submit this form to the	court with your other sche	edules.		
■ Y			,			
unse	all of your nonpriority unsecured cla cured claim, list the creditor separately one creditor holds a particular claim, li 2.	for each claim. For each	claim listed, identify what t	ype of claim it is. Do not list	t claims already inc	luded in Part 1. If more
						Total claim
4.1	Aargon Agency	Last 4 die	gits of account number	0093		\$3,778.00
	Nonpriority Creditor's Name					
	Attn: Bankruptcy Departmer 8668 Spring Mountain Rd	າt When wa	s the debt incurred?	Opened 11/09/15		
	Las Vegas, NV 89117					
	Number Street City State Zlp Code	As of the	date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	_				
	Debtor 1 only	☐ Contin	=			
	Debtor 2 only	☐ Unliqu				
	☐ Debtor 1 and Debtor 2 only	☐ Disput				
	At least one of the debtors and and	illoi	IONPRIORITY unsecured	d claim:		
	Check if this claim is for a comm	•				
	debt Is the claim subject to offset?		ations arising out of a sepa priority claims	ration agreement or divorce	e that you did not	
	No	·		g plans, and other similar d	ehts	
	■ NO	□ Debts				
	☐ Yes	■ Other.	Specify Hospital	Attorney Centennial	пшѕ	

Debtor	Panisse Renell Debesai	Case number (if know) 17-15654				
4.2	Aargon Agency Nonpriority Creditor's Name	Last 4 digits of account number 3492	\$1,688.00			
	Attn: Bankruptcy Department 8668 Spring Mountain Rd Las Vegas, NV 89117	When was the debt incurred? Opened 4/22/16				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify Center Of S Collection Attorney University Medical Center Of S				
4.3	Aargon Agency Nonpriority Creditor's Name	Last 4 digits of account number 0094	\$680.00			
	Attn: Bankruptcy Department 8668 Spring Mountain Rd Las Vegas, NV 89117	When was the debt incurred? Opened 11/09/15				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Collection Attorney Centennial Hills Hospital				
4.4	Aargon Agency Nonpriority Creditor's Name	Last 4 digits of account number	\$100.00			
	Attn: Bankruptcy Department 8668 Spring Mountain Rd Las Vegas, NV 89117	When was the debt incurred? Opened 1/27/15				
-	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	□Yes	Collection Attorney University Medical Other. Specify Center Of S				

Debto	Panisse Renell Debesai		Case number (if know) 17-15654	
4.5	Aargon Agency	Last 4 digits of account number	7166	\$100.00
	Nonpriority Creditor's Name Attn: Bankruptcy Department 8668 Spring Mountain Rd	When was the debt incurred?	Opened 10/26/15	
	Las Vegas, NV 89117 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Пу	Collection	Attorney University Medical	
	Yes	Other. Specify Center Of S	3	
4.6	Acceptance Now Nonpriority Creditor's Name	Last 4 digits of account number	4799	\$0.00
	Attn: Bankruptcy 5501 Headquarters Dr Plano, TX 75024	When was the debt incurred?	Opened 02/10 Last Active 12/01/11	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	Lateta	
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	i ciaim:	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Rental Agre	eement	
4.7	Ace Cash Express Nonpriority Creditor's Name	Last 4 digits of account number		Unknown
	1231 Greenway Drive, Suite 600 Irving, TX 75038	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other, Specify Payday Loa	n	

Debto	Panisse Renell Debesai		Case number (if know)	17-15654	
4.8	Ad Astra Recovery	Last 4 digits of account number	6995		\$1,880.00
	Nonpriority Creditor's Name 7330 W 33rd St Ste 118 Wichita, KS 67205	When was the debt incurred?	Opened 07/15		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar de	ebts	
	☐Yes	Other. Specify Collection	Attorney Rapid Cash	1 56	
4.9	Allied Collection Services	Last 4 digits of account number	0401		\$100.00
	Nonpriority Creditor's Name 3080 South Durango Drive Suite 208	When was the debt incurred?	Opened 2/28/14		
	Las Vegas, NV 89117 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar de	ebts	
	Yes	■ Other. Specify University	Med Center		
4.1	Allied Collection Services	Last 4 digits of account number	5401		\$56.00
	Nonpriority Creditor's Name 3080 South Durango Drive Suite 208	When was the debt incurred?	Opened 5/20/14		
	Las Vegas, NV 89117				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar de	ebts	
	☐ Yes	■ Other. Specify University	Med Center		

Debto	Panisse Renell Debesai		Case number (if know	v) <u>17-15654</u>	
4.1	Applied Card Bank	Last 4 digits of account number	2676		\$145.00
	Nonpriority Creditor's Name Po Box 5165 400 White Clay Center Dr Newark, DE 19711	Opened 03/13 Last Act 7/05/13		Last Active	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed			
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecure ☐ Student loans ☐ Obligations arising out of a separeport as priority claims		vorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card		lar debts	-
4.1	Cash 1 Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred?			Unknown
	1149 E. Desert Inn Road Las Vegas, NV 89110 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		-
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or div	vorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other simil	lar debts	
	Yes	Other. Specify Payday Loa	an		-
4.1	Cash Oasis Nonpriority Creditor's Name	Last 4 digits of account number			Unknown
	5628 W Charleston Blvd Las Vegas, NV 89146	When was the debt incurred?			-
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or div	vorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	ng plans, and other simil	lar dobte	
	■ No			iai uebis	
	∏ yes	Other Chesify Payday Los	an		

Debtor	1 Panisse Renell Debesai	Case number (if know)	17-15654
4.1	Cc Coll Svc	Last 4 digits of account number 1113	\$845.00
	Nonpriority Creditor's Name 8860 W Sunset Rd Ste 100 Las Vegas, NV 89148	When was the debt incurred? Opened 5/31/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce tha report as priority claims	t you did not
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify 10 Nvenergy	
4.1 5	Cc Coll Svc	Last 4 digits of account number 9143	\$128.00
	Nonpriority Creditor's Name 8860 W Sunset Rd Ste 100 Las Vegas, NV 89148	When was the debt incurred? Opened 7/31/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that	t you did not
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify 12 Dollar Loan Center	
4.1	Chase Bank, N.A.	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name PO Box 15298 Wilmington, DE 19850	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce tha report as priority claims	t you did not
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Overdrawn Checking	

Debt	or 1 Panisse Renell Debesai	Case number (if know) 17-15654	
4.1	Check City	Look A divite of account number	\$300.00
7	Nonpriority Creditor's Name ATTN: Legal Dept.	Last 4 digits of account number When was the debt incurred?	φ300.00
	P.O. Box 35227 Las Vegas, NV 89133 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Payday Loan	
4.1 8	Convergent Outsoucing, Inc	Last 4 digits of account number 6750	\$701.00
	Nonpriority Creditor's Name Po Box 9004 Renton, WA 98057	When was the debt incurred? Opened 05/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection Attorney Cox Communications	
4.1 9	Cox Communications	Last 4 digits of account number 0511	Unknown
	Nonpriority Creditor's Name PO Box 79175 Phoenix, AZ 85062-9175	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Cable	

Debtor	Panisse Renell Debesai		Case number (if know) 17-15654		
4.2	Harris & Harris	Last 4 digits of account number	3284	\$715.00	
0	Nonpriority Creditor's Name 111 W Jackson Blvd Suite 400	When was the debt incurred?	Opened 1/09/17		
	Chicago, IL 60604 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify Uhs Valley	Hospital Medical		
4.2	Las Vegas Finance Nonpriority Creditor's Name	Last 4 digits of account number	5371	\$222.00	
	5715 W Sahara Ave Las Vegas, NV 89146	When was the debt incurred?	Opened 02/15 Last Active 9/30/15		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i			
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims			
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Note Loan			
4.2	Lobel Financial Corp	Last 4 digits of account number	3234	\$6,586.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3000 Anaheim, CA 92803	When was the debt incurred?	Opened 01/15 Last Active 6/09/15		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a sepa			
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharin			
	☐ Yes	Other Specify Automobile			

Debto	Panisse Renell Debesai		Case number (if know) 17-15654				
4.2	Money Tree	Last 4 digits of account number		Unknown			
	Nonpriority Creditor's Name 6720 Fort Dent Way Suite #230	When was the debt incurred?					
	Seattle, WA 98188 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:				
	\square Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes	Other. Specify Payday Loa	ın				
4.2	Navient Nonpriority Creditor's Name	Last 4 digits of account number	2200	\$0.00			
	Attn: Bankruptcy Po Box 9500 Wilkes-Barr, PA 18873	When was the debt incurred?	Opened 10/18/01 Last Active 4/30/08				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims					
	■ No	Debts to pension or profit-sharin					
	☐ Yes	Other. Specify	☐ Other. Specify				
		Educationa	l				
4.2 5	One Nevada Credit Unio Nonpriority Creditor's Name	Last 4 digits of account number	3308	\$559.00			
	2645 S Mojave Rd Las Vegas, NV 89121	When was the debt incurred?	Opened 06/14 Last Active 8/24/14				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:				
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	■ Other. Specify Deposit Re	lated				

Case 17-15654-leb Doc 14 Entered 11/17/17 11:23:43 Page 24 of 49

Debtor	1 Panisse Renell Debesai		Case number (if know) 17-15654	
4.2	Divide Court Inc		9005	¢47.00
6	PlusFour Inc Nonpriority Creditor's Name	Last 4 digits of account number	8095	\$17.00
	Po Box 95846	When was the debt incurred?	Opened 04/15	
	Las Vegas, NV 89193			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Collection A Other. Specify Associates	Attorney Southwest Medical	
4.2	PlusFour Inc	Last 4 digits of account number	6950	\$17.00
	Nonpriority Creditor's Name Po Box 95846 Las Vegas, NV 89193	When was the debt incurred?	Opened 04/15	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	,	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Collection Associates	Attorney Southwest Medical	
4.2	Quantum Coll	Last 4 digits of account number	3801	\$93.00
<u> </u>	Nonpriority Creditor's Name 3224 Civic Center Drive	When was the debt incurred?	Opened 12/05/13	
	North Las Vegas, NV 89030 Number Street City State Zlp Code		or Charle all that are also	
	Who incurred the debt? Check one.	As of the date you file, the claim i	5. Спеск ан that арргу	
	Debtor 1 only	Пол		
		☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	n plans, and other similar debts	
		·	• •	
	Yes	■ Other. Specify 12 Accurate	e Pest Control	

Debtor	1 Panisse Renell Debesai		Case number (if know)	17-15654			
4.2	Rapid Cash	Last 4 digits of account number			Unknown		
9	Nonpriority Creditor's Name PO Box 780408	When was the debt incurred?					
	Wichita, KS 67278 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	_					
	Debtor 1 only	Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce	that you did not			
	Is the claim subject to offset?	report as priority claims					
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Payday Loa	n				
4.3	Rodo Company/cnac	Last 4 digits of account number	8161		\$0.00		
	Nonpriority Creditor's Name	-					
	5600 W Sharaha Ave Las Vegas, NV 89146	When was the debt incurred?	Opened 08/14 Last 2/05/15	t Active			
	Number Street City State Zlp Code	As of the date you file, the claim i					
	Who incurred the debt? Check one.	,					
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt	☐ Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims		,			
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar de	ebts			
	Yes	Other. Specify Automobile)				
4.3	Sentry Recovery & Coll	Last 4 digits of account number	7201		\$5,008.00		
<u>'</u>	Nonpriority Creditor's Name				*-,		
	3080 S Durango Dr. Suite 203 Las Vegas, NV 89117	When was the debt incurred?	Opened 3/19/15				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not			
	No	Debts to pension or profit-sharing plans, and other similar debts					
	□ Yes ■ Other. Specify 09 The Mariner Apartments						

Debto	r 1 Panisse Renell Debesai		Case number (if know) 17-15654	
4.3	Smart Finance	Last 4 digits of account number	3173	Unknown
	Nonpriority Creditor's Name 3105 E Sahara Ave Las Vegas, NV 89119	When was the debt incurred?	Opened 12/03/15 Last Active 2/11/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Automobile		
4.3	Source Receivables Mgmy, Llc	Last 4 digits of account number	5006	\$782.00
	Nonpriority Creditor's Name Po Box 4068 Greensboro, NC 27404	When was the debt incurred?	Opened 11/16	
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Collection	Attorney Sprint	
4.3 4	Transworld Sys Inc/33	Last 4 digits of account number	9319	\$1,481.00
	Nonpriority Creditor's Name 500 Virginia Dr Ste 514 Ft Washington, PA 19034	When was the debt incurred?	Opened 04/15	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
		_ Collection	Attorney Shadow Emergency	
	Yes	Other. Specify Physicians	, ,	

Debt	or 1 Panisse Renell Debesai		Case number (if know) 17-15654	
4.3 5	Transworld Sys Inc/33	Last 4 digits of account number	0350	\$1,346.00
	Nonpriority Creditor's Name Tsi Po Box 15630	When was the debt incurred?	Opened 09/14	
	Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Physicians	Attorney Shadow Emergency	
4.3 6	Transworld Sys Inc/33	Last 4 digits of account number	3189	\$812.00
	Nonpriority Creditor's Name Tsi	When was the debt incurred?	Opened 02/17	
	Po Box 15630 Wilmington, DE 19850			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes		Attorney Shadow Emergency	
4.3 7	Transworld Sys Inc/33	Last 4 digits of account number	5889	\$736.00
	Nonpriority Creditor's Name Tsi	When was the debt incurred?	Opened 07/15	
	Po Box 15630 Wilmington, DE 19850	when was the dept incurred:	Opened 07/13	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Collection A Other Specify Physicians	Attorney Shadow Emergency	

Debt	or 1 Panisse Renell Debesai	Case number (if know) 17-15654	
4.3 8	Transworld Sys Inc/33	Last 4 digits of account number 1954	\$669.00
	Nonpriority Creditor's Name Tsi Po Box 15630	When was the debt incurred? Opened 05/15	
	Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did no report as priority claims	t
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Collection Attorney Shadow Emergency Physicians	_
4.3 9	Transworld Sys Inc/33	Last 4 digits of account number 9761	\$608.00
	Nonpriority Creditor's Name Tsi Po Box 15630	When was the debt incurred? Opened 01/14	_
	Wilmington, DE 19850	_	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did no	t
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	■ No	Collection Attorney Shadow Emergency Other. Specify Physicians	
4.4	 		
4.4 0	Transworld Sys Inc/33 Nonpriority Creditor's Name	Last 4 digits of account number 0349	\$608.00
	Tsi Po Box 15630	When was the debt incurred? Opened 09/14	_
	Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did no report as priority claims	t
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Collection Attorney Shadow Emergency Other. Specify Physicians	

Case 17-15654-leb Doc 14 Entered 11/17/17 11:23:43 Page 29 of 49

Debtor	Panisse Renell Debesai		Case number (if know)	17-15654	
4.4 1	Transworld Sys Inc/33	Last 4 digits of account number	0351		\$59.00
	Nonpriority Creditor's Name Tsi Po Box 15630	When was the debt incurred?	Opened 09/14		
	Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	Student loans		41-44 41-4 4	
	Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar de	bts	
	Yes	■ Other. Specify Physicians	Attorney Shadow Em	ergency	
4.4	Universal Health Services	Last 4 digits of account number	7473		\$391.08
	Nonpriority Creditor's Name PO Box 5848	When was the debt incurred?			
	Hopkins, MN 55343-5848 Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.	,			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar de	bts	
	☐ Yes	Other. Specify Medical			
4.4	Us Dept Ed	Last 4 digits of account number	1988		\$0.00
	Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 St Paul, MN 55116	When was the debt incurred?	Opened 11/10 Last 4/18/13	Active	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community	Student loans			
	debt	Obligations arising out of a sepa	ration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims			
	No	☐ Debts to pension or profit-sharin	g pians, and other similar de	DTS	
	Yes	Other. Specify			
		Educationa	I		

Debto	Panisse Renell Debesai		Case number (if know) 17-15654			
4.4	Us Dept Ed	Last 4 digits of account number	6379	\$0.00		
	Nonpriority Creditor's Name Po Box 4222 Iowa City, IA 52244	When was the debt incurred?	Opened 11/26/10 Last Active 8/26/16			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	Other. Specify				
		Educationa				
4.4	US Dept of Education		6474	\$0.00		
5	Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00		
	Attn: Bankruptcy Po Box 16448	When was the debt incurred?	Opened 11/26/10 Last Active 2/03/12			
	Saint Paul, MN 55116 Number Street City State Zlp Code	_ As of the date you file, the claim	in Check all that apply			
	Who incurred the debt? Check one.	As of the date you me, the claim	s. Спеск ан так арргу			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	No	☐ Debts to pension or profit-sharir	g plans, and other similar debts			
	□Yes	Other. Specify				
		Educationa	l			
4.4	US Dept of Education	Last 4 digits of account number	6374	\$0.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116	When was the debt incurred?	Opened 11/26/10 Last Active 2/03/12			
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply			
	Who incurred the debt? Check one.	_				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	a ciaiiii:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	☐ Other. Specify				
		Educationa	ıl			

Case 17-15654-leb Doc 14 Entered 11/17/17 11:23:43 Page 31 of 49

US Dept of Education	Last 4 digits of account number	1641			
Nonpriority Creditor's Name	_				
Attn: Bankruptcy		Opened 11/26/10 Last Active			
Po Box 16448	When was the debt incurred?	9/30/11			
Saint Paul, MN 55116 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.	•				
Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	■ Student loans				
debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
Is the claim subject to offset?	report as priority claims				
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
☐ Yes	☐ Other. Specify				
	Educationa	nl			

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				•	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
Total	6f.	Student loans	6f.	\$	0.00
claims					
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	31,210.08
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	31,210.08

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 17-15654-leb Doc 14 Entered 11/17/17 11:23:43 Page 32 of 49

Fill in this information to identify your case:						
Debtor 1 Panisse Renell Debesai						
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		DISTRICT OF NEVADA				
	17-15654					
(if known)				☐ Check if this is an amended filing		

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	Oity		Otate	Zii Code	
2.0	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	City		State	ZIF Code	
2.0	Name				
	Number	Street			
	City		State	ZIP Code	

Fill in th	is inform	ation to identify your	case:		
Debtor 1		Panisse Renell D	ebesai		
		First Name	Middle Name	Last Name	
Debtor 2 (Spouse if,		First Name	Middle Name	Last Name	
United S	tates Bar	kruptcy Court for the:	DISTRICT OF NEVADA		
Case nui	mber <u>1</u>	7-15654			☐ Check if this is an
					amended filing
Officia	al Ear	m 106H			
_			obtoro		
Sche	auie	H: Your Cod	eptors		12/15
fill it out, your nam 1. Do N Your 2. W Arize	and num ne and ca o you had o es ithin the ona, Califo	nber the entries in the ase number (if known) we any codebtors? (If last 8 years, have you ornia, Idaho, Louisiana, ine 3.	boxes on the left. Attach the left. Answer every question. you are filing a joint case, do	not list either spouse perty state or territory to Rico, Texas, Washi	y? (Community property states and territories include
	_				
	■ No □ Yes				
	□ 163	•			
	Ir	which community state	e or territory did you live?	-NONE-	. Fill in the name and current address of that person.
		ame of your spouse, former sp umber, Street, City, State & Zip			
in lir Forr	ne 2 agai	n as a codebtor only i Schedule E/F (Official	f that person is a guaranto	r or cosigner. Make s	if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 6G). Use Schedule D, Schedule E/F, or Schedule G to fil
		1: Your codebtor mber, Street, City, State and Z	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1					☐ Schedule D, line
	Name				☐ Schedule E/F, line
					☐ Schedule G, line
	Number City	Street	State	ZIP Code	_
3.2	Name				Schedule D, line
	1401116				☐ Schedule E/F, line
	Number	Stroct			
	Number City	Street	State	ZIP Code	

Fill	in this information to identify y	our case:				
		Renell Debesai	_			
1 -	otor 2 use, if filing)					
Uni	ted States Bankruptcy Court fo	or the: DISTRICT OF NEVA	.DA			
(If kr	se number 17-15654		_	□ Aı		
	fficial Form 106l			M	M / DD/ Y	YYY
S	chedule I: Your I	ncome				12/15
spo atta	use. If you are separated and the separate sheet to this for the table to the table table to the table t	d your spouse is not filing worm. On the top of any addit	ing jointly, and your spouse is livi vith you, do not include informatic iional pages, write your name and	n about	your spo	ouse. If more space is needed,
1.	Fill in your employment information.		Debtor 1		Debtor 2	or non-filing spouse
	If you have more than one jo attach a separate page with information about additional	b, Employment status	■ Employed□ Not employed		☐ Emplo	
	employers.	Occupation	Unit Coordinator			
	Include part-time, seasonal, self-employed work.	or Employer's name	Valley Hospital Medical Cer	nter		
	Occupation may include stude or homemaker, if it applies.	dent Employer's address	620 Shadow Ln Las Vegas, NV 89106			
		How long employed	there? 12 Years		_	
Par	t 2: Give Details Abou	t Monthly Income				
	mate monthly income as of use unless you are separated.	the date you file this form. If	you have nothing to report for any li	ine, write	\$0 in the	space. Include your non-filing
	u or your non-filing spouse ha e space, attach a separate she		combine the information for all emplo	yers for t	that perso	on on the lines below. If you need
				For Deb	otor 1	For Debtor 2 or

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

- 3. Estimate and list monthly overtime pay.
- 4. Calculate gross Income. Add line 2 + line 3.

2. \$ 3,912.00 \$ N/A
3. +\$ 0.00 +\$ N/A
4. \$ 3,912.00 \$ N/A

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Panisse Renell Debesai	-		Case	number (<i>if k</i>	nown)	17-150	354		
						Debtor 1			ebtor iling s	2 or pouse	
	Cop	by line 4 here	4.		\$_	3,91	2.00	\$		N/A	-
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5	a.	\$	30	8.92	\$		N/A	
	5b.	Mandatory contributions for retirement plans	51	b.	\$		0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5		\$		0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans		d.	\$_		0.00	\$		N/A	-
	5e. 5f.	Insurance Domestic support obligations	51 51	e. •	\$_ \$		0.00	\$		N/A	-
	5g.	Union dues	5		\$ _		0.00	\$		N/A N/A	-
	5h.	Other deductions. Specify:		9. h.+	<u> </u>			+ \$		N/A	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.		\$		8.92	\$		N/A	-
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	3,43		\$		N/A	-
8.		t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			_	-, -					-
		monthly net income.	8	a.	\$		0.00	\$		N/A	
	8b.	Interest and dividends	81	b.	\$		0.00	\$		N/A	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8	c.	\$		0.00	\$		N/A	
	8d.		8	d.	\$		0.00	\$		N/A	-
	8e.	Social Security	8	e.	\$		0.00	\$		N/A	-
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	81		\$		0.00	\$		N/A	
	8g.	Pension or retirement income	8	-	\$_		0.00	\$		N/A	_
	8h.	Other monthly income. Specify:	_ 81	h.+	\$_		0.00	+ \$		N/A	-
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	. [\$	ı	0.00	\$		N/A	A .
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		3,433.08	+ \$		N/A	= \$	3,433.08
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ-		5,455.00]		14/7		3,433.00
11.	11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00										
12.		d the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certailies							12.	\$	3,433.08
13.	Do	you expect an increase or decrease within the year after you file this form	?						ι	Combin monthl	ned y income
		No.									

Official Form 106I Schedule I: Your Income page 2

-HILE	in this information to identify your case:		1							
Deb		Check if this is: An amended filing								
	tor 2		•	ving postpetition chapter the following date:						
` '	ed States Bankruptcy Court for the: DISTRICT OF NEVADA		MM / DD / YYYY							
	e number 17-15654									
(If kı	nown)									
Of	ficial Form 106J									
	chedule J: Your Expenses				12/1					
info	as complete and accurate as possible. If two married people are brimation. If more space is needed, attach another sheet to this inber (if known). Answer every question.									
Par 1.	Is this a joint case?									
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household?									
	☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debto	or 2.						
2.	Do you have dependents? \Bigcup_No									
	Do not list Debtor 1 and Debtor 2. Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?					
	Do not state the	•		_	□ No					
	dependents names.	Son		1	■ Yes □ No					
		Son		5	Yes					
		Son		7	□ No ■ Yes					
		Son		12	□ No ■ Yes					
3.	Do your expenses include expenses of people other than yourself and your dependents?									
Par										
exp	imate your expenses as of your bankruptcy filing date unless y enses as of a date after the bankruptcy is filed. If this is a supp licable date.									
the	ude expenses paid for with non-cash government assistance in value of such assistance and have included it on <i>Schedule I:</i> Yiicial Form 106I.)			Your expe	enses					
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	e 4. \$		1,086.00					
	If not included in line 4:									
	4a. Real estate taxes		4a. \$		0.00					
	4b. Property, homeowner's, or renter's insurance4c. Home maintenance, repair, and upkeep expenses		4b. \$ 4c. \$		25.00 0.00					
	4d. Homeowner's association or condominium dues		4d. \$		0.00					

5. Additional mortgage payments for your residence, such as home equity loans

0.00

ebtor 1 Paniss	e Renell Debesai	Case number (if known)	17-15654
. Utilities:			
	y, heat, natural gas	6a. \$	400.00
	ewer, garbage collection	6b. \$	45.00
	ne, cell phone, Internet, satellite, and cable services	6c. \$	235.00
6d. Other. S		6d. \$	0.00
	sekeeping supplies	7. \$	450.00
	children's education costs	8. \$	1,200.00
	dry, and dry cleaning	9. \$	
<u>-</u> .		· —	100.00
	products and services	10. \$	0.00
	ental expenses	11. \$	300.00
•	1. Include gas, maintenance, bus or train fare.	12. \$	100.00
Do not include	, clubs, recreation, newspapers, magazines, and books	13. \$	100.00
	tributions and religious donations	· —	
5. Insurance.	inibutions and religious donations	14. \$	0.00
	insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insu	, , ,	15a. \$	0.00
15b. Health in		15a. \$	
15c. Vehicle i		15c. \$	0.00
		· —	202.00
	surance. Specify:	15d. \$	0.00
Specify:	include taxes deducted from your pay or included in lines 4 or 20.	16. \$	0.00
7. Installment or	lease payments:		
17a. Car payr	nents for Vehicle 1	17a. \$	346.00
17b. Car payr	nents for Vehicle 2	17b. \$	0.00
17c. Other. S	pecify:	17c. \$	0.00
17d. Other. S	-	17d. \$	0.00
	s of alimony, maintenance, and support that you did not report as	 S	
	your pay on line 5, Schedule I, Your Income (Official Form 106I).		0.00
	ts you make to support others who do not live with you.	\$	0.00
Specify:		19.	
Other real pro	perty expenses not included in lines 4 or 5 of this form or on Sch	edule I: Your Income.	
20a. Mortgag	es on other property	20a. \$	0.00
20b. Real est	ate taxes	20b. \$	0.00
20c. Property	homeowner's, or renter's insurance	20c. \$	0.00
	ance, repair, and upkeep expenses	20d. \$	0.00
	ner's association or condominium dues	20e. \$	0.00
 Other: Specify 		21. +\$	40.00
	rei Care		
Gym Dues		+\$	10.00
2. Calculate you	monthly expenses		
22a. Add lines	4 through 21.	\$	4,639.00
	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$,
	2a and 22b. The result is your monthly expenses.	\$	4,639.00
ZZC. AUU IIIIE Z	za anu zzb. The result is your monthly expenses.	Φ	4,039.00
3. Calculate you	monthly net income.		
-	e 12 (your combined monthly income) from Schedule I.	23a. \$	3,433.08
	ur monthly expenses from line 22c above.	23b\$	4,639.00
	•		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	your monthly expenses from your monthly income.	23c. \$	-1,205.92
The resu	It is your monthly net income.	230. <u>Ψ</u>	1,200.32
	an increase or decrease in your expenses within the year after y		
	you expect to finish paying for your car loan within the year or do you expect you	ur mortgage payment to inc	rease or decrease because o
_	e terms of your mortgage?		
No.			
☐ Yes.	Explain here:		

Fill in thi	s information to identify your	case:		
Debtor 1	Panisse Renell D	ebesai		
	First Name	Middle Name	Last Name	
Debtor 2	E AN	ACT III AI		
(Spouse if, fi	ling) First Name	Middle Name	Last Name	
United St	ates Bankruptcy Court for the:	DISTRICT OF NEVADA		
Case nun	nber 17-15654			
(if known)				☐ Check if this is an
				amended filing
Official	Form 106Dec			
		n Individual D	ebtor's Schedu	ıles 12/15
obtaining		n connection with a bankrup		a false statement, concealing property, or to \$250,000, or imprisonment for up to 20
Did	you pay or agree to pay some	one who is NOT an attorney	to help you fill out bankruptc	y forms?
	No			
П	Yes. Name of person			Attach Bankruptcy Petition Preparer's Notice,
				Declaration, and Signature (Official Form 119)
	er penalty of perjury, I declare they are true and correct.	that I have read the summar	ry and schedules filed with thi	s declaration and
	•			
	s/ Panisse Renell Debesai		Cimatum of Dahton 0	
	Panisse Renell Debesai Signature of Debtor 1		Signature of Debtor 2	
`	Signature of Deblor 1			
[Date November 17, 2017		Date	

	ll in this infor	mation to identify you	r case:			
De	ebtor 1	Panisse Renell I	Debesai Middle Name	Last Name		
De	ebtor 2	i iist ivaine	Middle Name	Last Name		
1 -	ouse if, filing)	First Name	Middle Name	Last Name		
Un	nited States Ba	ankruptcy Court for the:	DISTRICT OF NEVADA			
Ca	ase number	17-15654				
	known)	11 10004				Check if this is an amended filing
	fficial Fo		Affairs for Indivi	duals Filing for I	Bankruptcy	4/10
Be info nur	as complete ormation. If r mber (if know	and accurate as possimore space is needed, vn). Answer every que	ible. If two married people attach a separate sheet to stion.	are filing together, both are this form. On the top of an	e equally responsible for s	
			arital Status and Where Yo	u Lived Before		
1.	what is you	ur current marital statu	15 f			
	☐ Married Not ma					
2.	During the	last 3 years, have you	lived anywhere other than	where you live now?		
	П					
	□ No ■ Yes Li	ist all of the places you l	ived in the last 3 years. Do r	not include where you live no	MA/	
			·	ŕ		
	Debtor 1 P	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
	5829 Smo Unit A	oke Ranch Rd.	From-To: 10/2015 to	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
		s, NV 89108	07/2017			FIOIII-10.
	tes and territo No Yes. M	<i>rie</i> s include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	gal equivalent in a commu evada, New Mexico, Puerto f Official Form 106H).		
_	Dist.			and bushess 1.1. at		
4.	Fill in the to	tal amount of income yo	u received from all jobs and	ng a business during this y all businesses, including par re together, list it only once u	t-time activities.	alendar years?
	□ No					
	Yes. F	ill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

Official Form 107

Debtor 1 Panisse Renell Debesai Case number (if known) 17-15654 Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) From January 1 of current year until \$36,260.24 ☐ Wages, commissions, ■ Wages, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For last calendar year: \$29,484.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$30,917.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose," During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

Creditor's Name and Address

Dates of payment

attorney for this bankruptcy case.

Total amount paid

Amount you still owe Was this payment for ...

Case number (if known) 17-15654

7.	Within 1 year before you filed for bankrupto <i>Insiders</i> include your relatives; any general par of which you are an officer, director, person in a business you operate as a sole proprietor. 11 alimony.	tners; relatives of any gene control, or owner of 20% or	eral partners; partner more of their voting	ships of which you	u are a genera ny managing a	al partner; corporations igent, including one for
	■ No					
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi		ments or transfer ar	ny property on a	ccount of a d	ebt that benefited an
	■ No					
	☐ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
			paid	still owe	Include cred	litor's name
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury of modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
	Lobel Financial Corp vs. Panisse Renell Debesai 17C005316	Collection	Justice Court, L Township 200 Lewis Ave Las Vegas, NV 8	-	☐ Pending ☐ On appe ☐ Conclud	eal
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		rty repossessed, fo	reclosed, garnis	shed, attached	d, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened				* - .
	Lobel Financial Corp Attn: Bankruptcy	Wages		10/5/	2017	\$415.74
	Po Box 3000	☐ Property was reposses	ssed.			
	Anaheim, CA 92803	☐ Property was foreclose	ed.			
		■ Property was garnishe	ed.			
		☐ Property was attached	l, seized or levied.			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca No Yes. Fill in the details.		uding a bank or fina	ancial institution	i, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date	action was	Amount
	C. Cantol Hamo and Addition	2000 INC ACTION THE	J. Julio: LOOK	taker		Amount

Debtor 1 Panisse Renell Debesai

Case number (if known) 17-15654

12.	Within 1 year before you filed for bankruptcy, court-appointed receiver, a custodian, or anot	was any of your property in the possession of an a her official?	assignee for the bene	efit of creditors, a
	■ No			
	□ Yes			
Pa	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankruptcy ■ No	, did you give any gifts with a total value of more t	han \$600 per person?	•
	Yes. Fill in the details for each gift.		_	
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankruptcy ■ No □ Yes. Fill in the details for each gift or contribute.	, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that total	Describe what you contributed	Dates you	Value
	more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	bescribe what you contributed	contributed	Value
Pa	t 6: List Certain Losses			
15.	or gambling? No Yes. Fill in the details.	or since you filed for bankruptcy, did you lose any	uning because of the	t, me, other disaster
	Describe the property you lost and Describe	ribe any insurance coverage for the loss	Date of your	Value of property
		de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	loss	lost
Pai	t 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or prepare	did you or anyone else acting on your behalf pay or ring a bankruptcy petition? ers, or credit counseling agencies for services require		rty to anyone you
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Clear Counsel Law Group 50 S. Stephanie St., Ste 101 Henderson, NV 89012 clearcounsel.com	Attorney Fees	10/20/2017	\$100.00
	001 Debtorcc, Inc. 378 Summit Ave. Jersey City, NJ 07306 debtorcc.org	Credit Counseling Course	10/20/2017	\$14.95

Debtor 1 Panisse Renell Debesai

Debtor 1 Panisse Renell Debesai

Case number (if known) 17-15654

17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor. Do not include any payment or transfer that you No	s or to make payments			r transfer any prope	rty to anyone who
	_ 110					
	Person Who Was Paid Address	Description and v transferred	alue of any prope	erty	Date payment or transfer was made	Amount of payment
10	Within 2 years before you filed for bonky into	مامونا الممينونا المان	v othornilas trans	far any nran		u than nuanautu
	Within 2 years before you filed for bankruptc transferred in the ordinary course of your bu Include both outright transfers and transfers mad include gifts and transfers that you have already No	siness or financial affa de as security (such as t	airs? he granting of a se			
	Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and v property transfer			ny property or received or debts change	Date transfer was made
	Person's relationship to you					
	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prot No Yes. Fill in the details.		y property to a se	elf-settled tru	st or similar device	of which you are a
	Name of trust	Description and v	alue of the prope	rty transferre	ed	Date Transfer was made
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ No Yes. Fill in the details.	, were any financial ac	counts or instrum	nents held in		
	Name of Financial Institution and	Last 4 digits of	Type of account	or Dat	e account was	Last balance
		account number	instrument	clos	sed, sold, ved, or nsferred	before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for	bankruptcy, any	safe deposit	box or other depos	itory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		escribe the c	contents	Do you still have it?
22.	Have you stored property in a storage unit or ■ No	r place other than your	home within 1 ye	ar before yo	u filed for bankrupto	cy?
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h		escribe the c	contents	Do you still have it?
		Address (Number, S State and ZIP Code)	treet, City,			

Debtor 1 Panisse Renell Debesai

Case number (if known) 17-15654

Par	t 9: Identify Property You Hold or Control for	Someone Else			
23.	Do you hold or control any property that some for someone.	one else owns? Include any prope	rty yo	ou borrowed from, are storing fo	r, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Des	scribe the property	Value
Par	t 10: Give Details About Environmental Inform	ation			
For	the purpose of Part 10, the following definitions	apply:			
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, groun	_	•	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	<u>-</u>	law,	whether you now own, operate,	or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or	nmental law defines as a hazardous	s was	ste, hazardous substance, toxic	substance,
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n the	y occurred.	
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	e und	ler or in violation of an environm	ental law?
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admini	strative proceeding under any env	rironn	nental law? Include settlements	and orders.
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case
Par	t 11: Give Details About Your Business or Cor	·			
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have a	ny of	the following connections to an	y business?
	☐ A sole proprietor or self-employed in a	-	-	_	
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	nip (L	LP)	
	☐ A partner in a partnership				
	☐ An officer, director, or managing execu	tive of a corporation			
	☐ An owner of at least 5% of the voting o	r equity securities of a corporation	l		

Official Form 107

Case number (if known) 17-15654

	■ No. None of the above applies. Go to F	Part 12.	
	☐ Yes. Check all that apply above and fill	in the details below for each business.	
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties. No	cy, did you give a financial statement to an	nyone about your business? Include all financial
	Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Par	12: Sign Below		
are t		false statement, concealing property, or ol	declare under penalty of perjury that the answers btaining money or property by fraud in connection ars, or both.
/s/	Panisse Renell Debesai		
	nisse Renell Debesai Nature of Debtor 1	Signature of Debtor 2	
Dat	November 17, 2017	Date	
Did y ■ N □ Y	_	ent of Financial Affairs for Individuals Filing	g for Bankruptcy (Official Form 107)?
Did :	ou pay or agree to pay someone who is not	t an attorney to help you fill out bankruptcy	y forms?
Пν	es. Name of Person . Attach the Bankru	ptcy Petition Preparer's Notice, Declaration, a	and Signature (Official Form 119).

Debtor 1 Panisse Renell Debesai

Fill in this inform	ation to identify your	2250.			
Debtor 1	Panisse Renell Do	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
	kruptcy Court for the:	DISTRICT OF NE			
	kruptcy Court for the.	DIOTRIOT OF IVE	VADA		
Case number 1	7-15654				Check if this is an
				a	mended filing
Official For	m 108				
<u>Statemen</u>	t of Intentio	n for Indiv	riduals Filing Under Chap	oter 7	12/15
If you are an indiv	idual filing under cha	oter 7 vou must fil	Lout this form if:		
	claims secured by yo	• •	rout this form ii.		
	d personal property a				
	er is earlier, unless th		you file your bankruptcy petition or by the date e time for cause. You must also send copies to		
	ople are filing together	in a joint case, bo	th are equally responsible for supplying correc	et information. I	Both debtors must
	nd accurate as possib ur name and case nur		needed, attach a separate sheet to this form.	On the top of a	ny additional pages,
Part 1: List You	ur Creditors Who Have	Secured Claims			
					4000) (111: 41
information bel	ow.		: Creditors Who Have Claims Secured by Prope	erty (Official Fo	orm 106D), fill in the
Identify the cred	ditor and the property t	nat is collateral	What do you intend to do with the property t secures a debt?		ou claim the property empt on Schedule C?
					•
Creditor's Ho	nor Finance		☐ Surrender the property.	□No	
name:			Retain the property and redeem it.		
Description of	2008 Honda Pilot 1	20,000 miles	☐ Retain the property and enter into a Reaffirmation Agreement.	■ Ye	S
property		,	Retain the property and [explain]:		
securing debt:			Retain and make regular payments		
Part 2: List You	ır Unexpired Persona	Property Leases			
For any unexpired	l personal property le	ase that you listed	in Schedule G: Executory Contracts and Unexperied leases are leases that are still in effect		
			the trustee does not assume it. 11 U.S.C. § 365		ou has not yet ended.
Describe vour un	expired personal pro	perty leases		Will the lea	ase be assumed?
_				_	
Lessor's name: Description of leas	sed			☐ No	
Property:				☐ Yes	
Lessor's name:				□ No	
Description of leas	sed				
Property:				☐ Yes	
Lessor's name:					
Official Form 108		Statement of In	tention for Individuals Filing Under Chapter 7		page 1

Debtor	Panisse Renell Debesai	Case number (if known)	17-15654
Descrip Property	tion of leased v:		□ No
	,		☐ Yes
Lessor's	s name: tion of leased		□ No
Property			☐ Yes
Lessor's	s name: tion of leased		□ No
Property			☐ Yes
Lessor's	s name: tion of leased		□ No
Property			☐ Yes
Lessor's	s name: tion of leased		□ No
Property			☐ Yes
Part 3:	Sign Below		
Under p property	enalty of perjury, I declare that I have indicated my intention about any that is subject to an unexpired lease.	y property of my estate that see	cures a debt and any personal
	Panisse Renell Debesai X		
	· · · · · · · · · · · · · · · · · · ·	nature of Debtor 2	
Sig	gnature of Debtor 1		
Da	November 17, 2017 Date		

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of Nevada

		L	District of Nevaua		
In re	Panisse Renell De	ebesai		Case No.	17-15654
			Debtor(s)	Chapter	7
4 5		OSURE OF COMPENS			. ,
c	ompensation paid to me	329(a) and Fed. Bankr. P. 2016(b) within one year before the filing of the debtor(s) in contemplation of of	of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or
					2,200.00
	Prior to the filing of	this statement I have received		\$	200.00
	Balance Due			<u> </u>	2,000.00
2. T	The source of the comper	nsation paid to me was:			
	■ Debtor □	Other (specify):			
3. T	The source of compensation	on to be paid to me is:			
	■ Debtor □	Other (specify):			
4. I	I have not agreed to s	hare the above-disclosed compens	sation with any other person	unless they are memb	pers and associates of my law fi
[e the above-disclosed compensation at, together with a list of the names			
5. I	n return for the above-di	sclosed fee, I have agreed to rend	er legal service for all aspect	s of the bankruptcy c	ase, including:
b c	 Preparation and filing 	's financial situation, and renderin of any petition, schedules, statem debtor at the meeting of creditors needed!	ent of affairs and plan which	may be required;	
	Debtor and At the filing of a post-petition,	torney have entered into two skeletal bankruptcy petition for the completion of the bal nes, 147 F.3d 1185 (9th Cir. 19	and nothing else. The se lance of schedules and r	econd fee agreeme	ent was for \$2,000, signed
6. B	By agreement with the de	ebtor(s), the above-disclosed fee de	oes not include the following	service:	
			CERTIFICATION		
	certify that the foregoing ankruptcy proceeding.	g is a complete statement of any a	greement or arrangement for	payment to me for re	epresentation of the debtor(s) in
No	ovember 17, 2017		/s/ Matthew M. Mo	Arthur	
Do	ate		Matthew M. McAr		
			Signature of Attorne Clear Counsel La		
			50 S. Stephanie S	St., Ste 101	
			Henderson, NV 89	9012	
			Name of law firm		

United States Bankruptcy Court District of Nevada

re	Panisse Renell Debesai	Debtor(s)	Case No. Chapter	17-15654 7
	VERI	FICATION OF CREDITOR	MATRIX	
abo	ove-named Debtor hereby verifies t	that the attached list of creditors is true and co	orrect to the best	of his/her knowledge.
ıte:	November 17, 2017	/s/ Panisse Renell Debesai		

Signature of Debtor